New Jersey Emergency Medical Services Council
June 7, 2000
MINUTES

Call to Order: Dr. James Pruden, Council chairperson, called the meeting to order at 4:15 p.m.

Opening Remarks: Dr. Pruden thanked the Allentown First Aid Squad for its hospitality.

Approval of Minutes: *A motion was made and seconded to approve the March 1, 2000, minutes.* Mr. McCabe suggested that "No report" might instead say "Not represented," if a committee chairperson is absent. Mr. Muench said Al McNally is heading the communications guidecard committee, although he had mentioned Ira Shine at the March meeting. *The minutes were approved with those changes.*

Committee/Council Reports:

Systems Finance/Operations Committees: Mr. H. Mickey McCabe, committee chairperson, requested the committee reports be combined in order to discuss NJ EMS Coalition activities regarding the HCFA Negotiated Rulemaking (NRM) issue. He then asked Mr. Martin Hogan to summarize the Coalition's efforts. Mr. Hogan said Coalition members, along with a Governor's aide and OEMS Director Gerard C. Muench, Jr., traveled to Washington, DC, on April 26 to meet with HCFA representatives. Also attending were several NJ Hospital Association representatives and aides of most of NJ's federal legislators. Early in the meeting, the HCFA representatives seemed confused as to how the NJ system and its billing process worked. Even if NJ is successful in retaining Medicare Part A reimbursement for MICUs, there may be some limits to how much Part A will pay. Many issues are not yet resolved, although the value of NJ's volunteer system was recognized. Since then, the NJ Assembly and Senate have passed concurrent resolutions; these have been forwarded to HCFA. Mr. Hogan said this was the first time so many EMS-related organizations have worked together on an issue of common concern. The League of Municipalities and some individual municipalities have passed resolutions supporting the EMS system. Congressman Frelinghuysen's office drafted a letter to HCFA, noting NJ's concerns; all the NJ federal legislators signed it. The bipartisan appeal was read into the Federal Register; a second letter is planned. Mr. Hogan said it was important that HCFA responds to the letters, in order to assure that HCFA leadership understands NJ's position. Ironically, the present NJ EMS system saves money for HCFA. Redistribution of funds under Negotiated Rulemaking may actually cost HCFA more in combined BLS and ALS payments in New Jersey. The Coalition is working with federal legislators to ask HCFA for an exemption, so that MICUs will not receive lower reimbursement under the new plan and the NJ EMS system can remain intact. Mr. Hogan concluded by saying that the group was fighting for the NJ EMS system and thought HCFA would not take future actions without considering NJ. Mr. McCabe said it was important to stay on top of this issue. He thanked Mr. Hogan for his report and Ms. Julie Aberger for her work with the Coalition. Ms. Mary Ann Ferrara, on behalf of the NJ State First Aid Council (NJSFAC), said she never thought working on the issue would be such a monumental feat. The volunteer community has pledged to keep the letter writing campaign going. The Coalition offered the NJ system as a model to HCFA for the other 49 states. *It was moved and seconded to accept the report.*

Discussion followed. Information going out should be correct and the EMS community should speak with one voice on the issues. There have been some problems with entities supporting the system, but doing so with incorrect information. There are position statements, sample letters, talking points, and other materials available for use. Dr. Pruden asked those present to consider alternatives, should NJ be unsuccessful with HCFA. Mr. Muench said, once the Federal Register is published with the HCFA NRM information, NJ must work quickly to prepare its comments. Dr. Pruden said that might necessitate a quick open meeting to generate a unified response. Mr. Muench said a public meeting might be called to discuss other options, if NJ is turned down. Ms. Ferrara noted the position of the EMS Council and the Coalition (whose members act as individual citizens and directly interact with legislators) may differ in the end, since the Council is advisory to the Commissioner. She cautioned that any comments that are generated should reflect who is speaking. Mr. Hogan noted that one of the big successes is the six entities working together with a shared power base in the Coalition. He encouraged other groups to join the work, adding those groups must be coordinated with the Coalition and speak with the same unified tone. Ms. Deborah Murante said she would like more information disseminated to the general public so they also could comment, once HCFA's plan is published. Although many of the newspapers have had editorials, the news is not yet widely disseminated to the senior community. Ms. Ferrara said the NJSFAC has distributed information to all the districts. The Atlantic Health System has a senior focus group of 25,000 members and word will go out to all of them. *The motion to approve the report passed.*

Basic Life Support (BLS) Committee: Ms. Ferrara, chairperson, noted that several people volunteered to be on the committee; however, the group was unable to meet because of the HCFA issue. If anyone wants to join the committee, see her. Discussion ensued about a rumor the FDA was requiring a prescription in order for EMS services to obtain saline or sterile water. Suggestions were made on ways to verify this, including obtaining clarification from the vendor or contacting the FDA directly. *A motion was made, seconded and passed to approve the report.*

By laws: Dr. Jennifer Waxler, chairperson, said there was no report.

EMS for Children: Ms. Nancy Kelly-Goodstein reported in the absence of Dr. Frank Briglia, EMSC chairperson. The last EMSC meeting was on May 23, 2000. Minutes of the March meeting, which were approved, will be posted to the OEMS web site. The first EMSC one-day conference was held on May 18, in conjunction with EMS Week activities. About 70 people attended; feedback was positive. The conference planning committee will meet on July 25, following the next EMSC meeting, to make 2001 plans. Suggestions are welcome. Regulations for hospital and emergency department on-call physicians will be published in the June 19 New Jersey Register. This should clarify some misconceptions from earlier publications. The 30-day public comment period will begin on June 19. Several NJ physicians were presenters at the national EMSC conference held in Baltimore. Ms. Kelly-Goodstein thinks that New Jersey is slightly ahead of or on a par with other states, as we have statewide pediatric standing orders, an active EMSC Council, a minimum ED and vehicle equipment pediatric list, and other innovations. The National Registry is expanding its paramedic examination to include requirements for pediatric airways and intraosseous infusions. Prevent Child Abuse is looking for adult male mentors to discuss child abuse in their communities. If interested, see her after the meeting. Discussion followed among NJ EMS Council members on the need for an on-call regulation and whether it would be enforceable. Concerns were also raised as to the possible fallout from the regulation, if a hospital's rules provided for sanctions against physicians who miss the call deadline. *A motion was made, seconded and passed to accept report.*

Communications: Mr. Gerard C. Muench, Jr. first introduced Dr. George T. DiFerdinando, Jr., the new DHSS Deputy Commissioner. Mr. Muench said the EMS Communications Committee met in both March and May. Meeting topics were the effect of OpSail 2000 on NJ EMS and the new 800 MHz system for the event. The goal is to have at least one dispatch center in each county on the 800 MHz system. OEMS has purchased portable radios and will assist. The EMS Council's request for an ongoing

guidecards advisory group was passed on to Mr. Al McNally. The upcoming national Emergency Cardiac Care conference may change the telephone instructions for CPR. The new instructions may be for compressions only, but those recommendations will come directly from the American Heart Association.

Mr. Muench asked Mr. Craig Reiner for a 911 Office update. Mr. Reiner said the 911 law was amended in June 1999 and the Office of Emergency Telecommunications Services (OETS) was relocated from the Department of Law and Public Safety/NJ State Police to the Office of Information Technology (OIT). The original 911 law required the 911 Commission to expire, once the 911 network was completed. The Commission did expire, but continued as an advisory group. The 1999 law reinstated a formal 911 Commission and the Governor's Office is working to reconstitute the Commission's membership. The deadline to readopt administrative regulations is approaching, some of which are of interest to the NJ EMS Council. For example, the requirement to have emergency medical dispatch (EMD) training was originally waived for existing dispatchers. The new regulations will require all EMS dispatchers to have EMD training by the end of 2002. Nothing presently mandates using the emergency medical dispatch guidelines; the new regulations will require dispatchers to use the guidecards and to provide prearrival instructions, when practical. The proposal's 30-day comment period ends July 5. The information will be widely circulated and will appear on the OIT web site. Mr. Reiner said he did not know of any other state with an emergency medical dispatch guidecard requirement and EMD training requirements. *A motion was made, seconded, and passed to accept the report.* Mr. Muench added that OpSail 2000 visitors could impact heavily on the NJ waterfront. The event is being coordinated in NJ through the Office of Emergency Management and Hudson County. The three area MICU centers can access 800 MHz during OpSail. Dr. Steven Marcus, NJPIES, reported that telephone calls with blocked Automatic Number Identification (ANI) are being received quite frequently. If a person blocks caller ID, the poison center cannot call back for patient follow-up and identification. Mr. Reiner said he would check on the matter. Dr. Marcus said it also was difficult to get an ANI for cell phones. Mr. Reiner replied that wireless 911 is a problem and OETS is working with the cellular companies to get call back numbers.

EMT Training Fund Advisory Council: Mr. James Mondoro gave the report in the absence of Mr. Robert Dinetz. The EMT Training Fund (EMTTF) meeting was held on March 29, 2000. At that meeting, it was reported the proposed changes to the EMT-Defibrillation rules were published for final adoption in the February 22, 2000 New Jersey Register. This action eliminated approximately 90% of the rules regarding EMT-D program training and operation. Defibrillation is now a standard skill for EMTs. There was a brief discussion at the March meeting on the laryngeal mask airway (LMA). The group then passed a motion to include LMA in the NJ EMT training program, pending the receipt and evaluation of additional materials from Dr. Elliot Justin. The new training program will require additional equipment, which could be funded by the EMTTF. The next EMTTF meeting will be June 28 at 4p.m. at the Allentown First Aid Squad. *A motion was made and seconded to accept the report.* Ms. Ferrara said the NJSFAC had some very serious concerns on the motions that were made at the EMTTF meeting and the actions of the EMTTF Council. These included concerns on the interim AED training curriculum. A question as to whether "live" defibrillators could be purchased with the EMTTF monies has gone to the Attorney General's (AG's) office. When the EMTTF Council does vote to take action, why isn't the action being taken immediately? They have waited 2 ½ years for an AG's ruling on whether EMT books can be purchased for the courses. She suggests that information as a report addition. Dr. DiFerdinando said he was uncomfortable with the circuitous route that items take from the DHSS to the AG's office and that some issues have been hanging for so long. He said, "If we don't want to do something or think it's not a good idea, we'll just say no." He said that he and Mr. Muench would identify the unacceptable delays and see how best to get them resolved. He added that delays are not meant to be substitute "no's," concluding that he wants to get things accomplished, if they are not ill advised. *The report was accepted.*

Professional Education: Mr. Mondoro again reported in the absence of Mr. Dinetz. EMTs who obtained AED training through previously recognized training programs (e.g., American Heart Association,

American Red Cross, and National Safety Council) may continue to administer AED, when needed. They will not be required to retrain until they enroll in their next EMT-B core recertification course. This will ensure there will be no interruption or decline in the number of EMTs able to perform AED. The "Interim Defibrillation Training Program" has been implemented by OEMS as an elective continuing education course. Information and a course outline were mailed last February to all parties affected by the regulatory changes. The course represents an edited version of the objectives and material found in the EMT-B national standard curriculum and is designed for EMTS, who, for whatever reason, have not yet obtained AED training and who do not want to wait until their next recertification course. Mr. Phil Dickison of the National Registry of EMTs is conducting three regional orientations for the EMT course sponsoring agencies, course coordinators, and instructors. The orientation will familiarize program personnel with the Registry's test development process and its policies and procedures, as they relate to NJ. Meetings will be held at Gloucester County College, Middlesex Fire Training Academy, and the EMS Training Center in Union. OEMS will meet with program personnel again in the fall, prior to implementation of the new testing program. *A motion was made, seconded and passed to accept the report.* Ms. Ferrara noted she was opposed to accepting the report.

Office of Emergency Management (OEM): Mr. Robert Hansson reported that NJ will host Albanian Army officers, who provide Albanian civil defense, teaching them urban search and rescue (USAR) techniques, especially heavy masonry search and rescue. The new USAR team is honored to be chosen by the U.S. Department of Defense to provide the training. USAR team training is proceeding and equipment is arriving. There will be a two-week FEMA training program for structural collapse, which has only been given one other time nationally. OEM will be on standby for OpSail and will have a pre-staged high speed naval ship and equipment available. Planning is under way for OpSail along the coast, as ships sail from Philadelphia before arriving in New York. The State Police Operations Center will be open for 10 days before July 4 because of OpSail activities in the surrounding area. OEM is planning for the Republican convention in Philadelphia, as some events and lodging will be in NJ. Sgt Stephen Hoptay is working with Mr. McCabe and Mr. Frank Goodstein, NJSFAC Mobilization chairperson, on OpSail. NJ is relying on local assets, since NY got most of money. Direct any OpSail questions to either Mr. Goodstein or Mr. McCabe. *A motion was made, seconded and passed to accept the report.*

Legislative Committee: Mr. Martin Hogan said pending legislation includes several bills of interest. He thanked Ms. Susan Caputo for preparing the report. A.2575 would require nursing homes to publicize staffing on each shift and unit. A.316 says healthcare facilities have to monitor pain as the fifth vital sign and document it. A.2578 allows the NJ Healthcare Financing Authority to refinance facilities that are transitioning to other uses. Federal regulations will permit a "Safe Harbor" for ambulance restocking. A copy of this information was made available and those present were urged to comment accordingly. A.2218 requires that an impact statement be written for any proposed rules affecting the volunteer rescue squads and fire departments. The bill proposes that the NJ EMT Training Fund review pending rules, but the NJ EMS Council, with input from the NJSFAC, may be more representative of all the affected services. *A motion was made and seconded to approve the report.* Ms. Ferrara said the suggestion for NJ EMS Council review was made because the EMTTF does not have fire service representation and is primarily involved with disbursement of monies from the Training Fund. However, the NJ EMS Council does have diverse representation, reports to the Department, and the commissioner has a direct link to the legislative process. A.2218 has gone through the Assembly and is now sitting in the Senate, where any needed amendments could be made. Ms. Ferrara made a motion *that the review of any proposed regulations go to the NJ EMS Council for review and not the EMTTF.* Mr. Muench reminded the group that any recommendation about pending legislation would go to the commissioner and she would act upon the recommendation. It appears the present version of A.2218 needs to be changed. *The motion to accept the report passed.* Dr. DiFerdinando added that any recommendations to the commissioner would actually go to his desk. He knows what the will of the Council is, and, although he has not read the bill, the Council's comments will be helpful, as will the comments of the NJSFAC.

MICU Advisory Council: Dr. Pruden reported that HCFA NRM was a major topic of discussion at the recent MICU Advisory Council meeting. Some medications usually stocked on the MICUs are in short supply. It was decided that if the American Heart Association endorses amiodarone, then the MICUs should move to accept it in NJ. Discussion included the expense of some MICU medications in relation to the expected Negotiated Rulemaking fee schedule. For example, an average MICU run might be reimbursed at $400, but four boluses of cardizem cost $600. There was also discussion on intraosseous materials. Dr. Pruden asked Dr. Jennifer Waxler to discuss the Rapid Sequence Induction intubation (RSI) and base command courses under development. Dr. Waxler said the base station guidebook is complete and out for review. It will be published as a small spiral notebook, which will be given to all base command physicians. The educational video should be completed within the next six months. All base command physicians would be required to view the video within two years of its release. A work group is writing a standardized RSI curriculum. This will emphasize they are serious about prehospital personnel using the procedure. Plans call for about four hours of lecture and four hours of practice stations (one-day course). The work group hopes to have MICU Advisory Council signoff soon and then forward the curriculum to the DHSS. Once the curriculum is approved, there will probably be a statewide train-the-trainer course. *A motion was made and seconded to accept the report.* Discussion followed. Dr. Pruden asked if any of the organizations represented on the Council had discussed Plan C (reconfiguring the EMS system in NJ), if the final HCFA proposal was unacceptable. It appears some groups have met to discuss the issue and others will meet shortly, if the Coalition is unsuccessful in preserving the system "as is." Dr. Pruden acknowledged that each group's ideas might be different, but having a core of ideas will offer a base from which to work, if necessary. He reminded everyone that the ultimate goal is to have a consistently high level of EMS care statewide. *The report was approved.* Mr. Hogan reiterated that the Coalition's thrust is to support the NJ EMS system as a whole.

NJPIES: Dr. Steven Marcus said a federal poison prevention initiative passed. In the fall there will be a new nationwide toll-free poison control number. He would appreciate Council support in publicizing the new number. Johnson & Johnson has agreed to publicize the new number nationally. *A motion was made and seconded to accept the report.* Discussion followed. Dr. Marcus explained that all prior poison center numbers could be answered if called, but would not be publicized. A massive educational campaign will be mounted to avoid public confusion. NJPIES is working with the NJSFAC and fire departments to get the word out. If a caller is located in NJ, the call will be answered by the NJ poison center. There will also be enhanced support from nearby cooperating centers. The new federal initiative should help in heavy call volume times. *The motion to accept the report was passed.*

NJ State First Aid Council Report: Ms. Ferrara introduced Ms. Barbara Aras, NJSFAC Education Chairperson. Ms. Ferrara said the NJPIES educator would attend a future NJSFAC meeting. The annual convention will run October 19-22 and will be held at the Nevele Grand Resort, Ellenville, NY. Mr. Hansson is coming to speak on Weapons of Mass Destruction. OEMS will provide computers for CEU lookup and has offered to lead some seminars. The NJSFAC could make room on the agenda for Dr. Marcus to discuss the poison center. A paramedic who was injured at Daytona Speedway will be the keynote speaker and present several seminars. There will be one registration form per person and attendees can register for all courses on the same form. See anyone in the NJSFAC, if you are interested in attending. NJSFAC is close to a data set collection methodology and met with the OEMS to discuss the matter; the NHTSA data element list is down to the bare bones minimum. They hope to have the data set accepted fully and in operation by the end of the year. The NJSFAC membership rolls are increasing. The group is increasing its standard inspections, which are done every year. By the end of the year, they hope to have all the squads inspected. They have inspection stickers (sticker is placed on the back of the ambulance) to show the vehicle meets requirements. Mr. Dan Sullivan is coordinating the effort. They also check training records annually. *A motion was made and seconded to accept the report.* Discussion followed. Mr. McCabe said he wanted to acknowledge the NJSFAC's forwarding thinking regarding the data elements and the inspections, a sentiment that Dr. Pruden seconded. *The motion to accept the report was approved.*

Public Education: Dr. Jennifer Waxler, chairperson, asked the members to acknowledge Ms. Sarah Maestripieri for making the EMS awards dinner and presentation such a success, which they did.

Trauma Center Council (TCC): Dr. Pruden said he had spoken with Dr. Jeffrey Hammond, Trauma Council chairperson, regarding the TCC's recent meeting. Dr. Hammond had said that the group was concerned about reduction proposals to the no-fault PIP insurance fee schedule. Physicians met with the Commissioner of Banking and Insurance and emphasized the proposal would be bad for trauma centers. As a result, the proposal will only be applied to non-trauma centers. Members were referred to the New Jersey Register for details. Another issue discussed was denial of some insurance payments for patients who had motor vehicle crashes and other incidents related to alcohol intoxication. The Commissioner felt the law was being improperly interpreted by insurers. The Department of Banking and Insurance will be looking at ways to clarify to insurers that they are obligated to pay for these events. Also there has been some difficulty with the Cales system (presently used for the trauma registry); the TRACS system (a registry system developed by the American College of Surgeons) is inadequate. While there is a mandate to collect trauma data, there is no way to track it. Dr. Pruden emphasized that data is needed, but should not be used to punish the data collectors. *A motion was made, seconded, and passed to accept the report.*

Dr. Pruden then asked Dr. DiFerdinando to say a few words. Dr. DiFerdinando spoke about his background and emphasized that he wants to learn more about EMS. He said he is somewhat conversant with purchasing services and working with the federal government. He is looking forward to learning more about DHSS's role and EMS in NJ and to working with the EMS community as partners.

OEMS Report: Mr. Muench introduced Mr. William (Bill) Duffy who will be coordinating air medical, communications, and trauma activities. Mr. Muench handed out a data collection information sheet for Street EMS that was sent to all the paid/regulated services. OEMS has been working with Dr. Eliott Justin, NJSFAC medical director, to encourage volunteer services to use the same parameters to collect data. Initially the data is being voluntarily collected from the Street EMS regulated services, but in 2001 it will be required from all paid "street" services, similar to the MICU quarterly report requirement. He thanked the members of the statewide uniform run sheet group and noted there is an official run sheet, if a service wants to use it. OEMS is also looking to change some of the collection points for MICU data, in order to have the data better coordinate with BLS data. To implement the legislatively mandated defibrillator enhancement program for first responder agencies, OEMS sent letters out to all mayors to forward to local "first responders." About 145 defibrillators will be distributed to agencies that apply and meet program criteria. On June 19 the new Satellite Limited Emergency Department (SLED) regulations will be published in the New Jersey Register. The facilities are operated at acute care hospitals that have closed, but are retaining minimal ED capability. They will accept BLS, but not ALS, patients. *A motion was made and seconded to accept the report.* Discussion followed. Mr. Muench noted the defibrillator program gave first priority to those police, fire, and EMS services that provide first response, but do not already have defibrillators. The funds come from a special targeted appropriation to the DHSS for first response agencies. Ms. Ferrara said she thought the NJSFAC should have been informed the letters were going to all the mayors. By not letting the squads know the letters were coming, the mailing caught all of them by surprise. She noted that in some municipalities there is a good relationship between the squads, the fire department, and the government, but since no one knew the letter was coming, they could not appropriately advise the mayors. Dr. DiFerdinando apologized for any miscommunication and said the Department owed everyone a "heads up," even if it were verbal. He noted, however, it was not a DHSS initiative but a Legislative one. Ms. Ferrara asked why the State is giving defibrillators to the first responders when the monies are held up for the squads' defibrillators from the EMT Training Fund. Mr. Fred Steinkopf said a "heads up" to Ms. Ferrara, as NJSFAC president, or to the districts, or the NJ EMS Council would have been appropriate so they could respond. Mr. Muench replied the initial intent was for all the defibrillators to go to police departments, but DHSS decided that the range of eligible agencies

should be broadened. Everyone agreed it was appropriate for the program to proceed; the difficulty was the various parties thought they lacked a "heads up". *The report was accepted.*

New Business: Dr. Waxler said the NJ ACEP held a dinner June 19 at Marsilio's in Trenton.

The date and time for the next meeting was discussed in depth, as many people had conflicts with the original September 13 date and various members found a late afternoon or evening meeting inconvenient. ***The group agreed to switch the meeting to 1 p.m. on September 20 in Allentown.***

Public Comment:

Ms. Sue Caputo thanked Mr. McCabe for funding the NJ EMS Council's refreshments at Allentown.

Mr. Howard Meyer thought the Coalition needed to get more information out to the general public, especially after reading some published articles. He suggested the information include what is the Coalition, what is its history, who belongs, what are they trying to do. We do not want to confuse the public, so various means, maybe even a web page, could be used to disseminate accurate information. With respect to the 911 regulations for dispatcher training, he asked if the "State mandates/State pays" criteria come into effect here. Mr. Reiner said there is a balance against some other training usually required that will allow everyone to get the mandated training at basically the same cost. Mr. Meyer said he had a problem with Council recommendations going to the DHSS for further action. This means recommendations die, if they do not suit the Department. The current method puts a muzzle on the Council. Why not copy any letters that go to the Department to the people who might be affected (e.g., the legislators). Mr. Meyer said that Assemblyman Gusciora gave a public commitment that once it was required for all EMTs to be defibrillator-competent that A.178 would be pulled. However, this has not occurred. He suggested the Legislative Committee might want to pursue the matter.

Mr. Louis Sasso said he would like to see some movement on the Critical Care Transport Unit (CCTU) issue, as this will have a huge effect on the EMS system. Ms. Halupke said that Ms. Darcy Saunders, OEMS legal specialist, and Mr. Chuck McSweeney have developed a draft regulation. This will be reviewed within the Department and then brought before the Operations committee. It is a massive undertaking, because it affects both BLS and ALS services. CCTU will appear in N.J.A.C. 8:41, but part of N.J.A.C. 8:40 will also have to be modified. Ms. Halupke said it should be sent to the Operations committee before the September NJ EMS Council meeting.

Mr. McCabe concurred that CCTU is a serious matter and added that a high amount of Medicare fraud is being done in CCTU billing. He said Medicare is approving a $350 non-emergent base and over $1,200 for emergency CCTU-type service (even if it is non-emergent, but was asked for the same day). The co-insurance payment alone is more than the cost of the same trip by a BLS service. At the time the Medicare "CCTU" rate was set in New Jersey, Medicare only looked at the two services providing that level of care and set the rate.

Dr. Pruden urged members to bring issues to him or Ms. Maestripieri to have them added to the agenda.

The meeting adjourned at 7:15 p.m.

Next meeting September 20, 2000, at 1 p.m. at the Allentown First Aid Squad building.

ATTENDANCE
NEW JERSEY EMERGENCY MEDICAL Services COUNCIL
June 7, 2000

Members Present:

Mr. Richard Bailey
NJSFAC, Southern Area VP

Mr. William Blanken
NJSFAC, Central Area VP

Ms. Cathy Cardea
New Jersey Hospital Assoc

Dr. George T. DiFerdinando, Jr.
Deputy Commissioner, NJ DH&SS

Ms. Mary Ann Ferrara
NJ State First Aid Council

Mr. Robert Hansson
NJ State Police, Office of Emergency Management

Mr. Martin Hogan
New Jersey Association of Paramedic Programs

Dr. Steven Marcus
NJPIES

Mr. H. Mickey McCabe
Medical Transportation Assn of NJ

Mr. Gerard C. Muench, Jr.
NJ DH&SS, OEMS

Ms. Deborah Murante
Paid EMT Representative

Dr. James Pruden
MICU Advisory Council

Mr. Craig Reiner
NJ State Police, OETS

Mr. Fred Steinkopf
NJ State First Aid Council

Dr. Jennifer Waxler
American College of Emergency Physicians

Alternates:

Mr. James Mondoro
For: Mr. Robert Dinetz
NJ DH&SS, OEMS

Members Absent/Excused:

Mr. John Barlas
Consumer Representative, AARP

Dr. Frank Briglia
EMSC Advisory Council

Mr. Jesus Cepero
NJ State Council, Emergency Nurses Association

Dr. Jeffrey Hammond
NJ Trauma Center Council

Col. Peter J. O'Hagan
Dept. L&PS, Div of Highway Traffic Safety

Hon. Joseph A. Palaia
Senator, 11th District

Guests Signing In:

Ms. Julie Aberger
NJSFAC, Editor Gold Cross

Ms. Barbara Aras
NJSFAC, Education Chairperson

Ms. Ruth Bertagni
Allentown First Aid Squad

Mr. Sylvio Bertagni
Allentown First Aid Squad

Ms. Susan Caputo
Morristown Memorial Hospital, Council Alternate

Ms. Carol Floyd
Allentown First Aid Squad

Mr. Frank Goodstein
NJSFAC Mobilization Chairperson

Mr. Alstyn L. Hart
Hopewell EMU; Ninth District VP NJSFAC

Ms. Sarah Hart
Hopewell EMU, NJSFAC 9th District Membership Secretary; Council Alternate

Chief Al Lincks,
Vineland EMS; Council Alternate

Ms. Leigh Marcus
NJPIES

Mr. Howard Meyer
NJSFAC; Council Alternate

Mr. Louis Sasso
Robert Wood Johnson University Hospital

Ms. Abigail Smith
Allentown First Aid Squad

Mr. Roger Stein
NorthSTAR

Ms. Deborah Timpson
Pending Council Appointment as Paramedic Representative

Other Members of the Allentown First Aid Squad may have been present, but did not sign in

OEMS/DH&SS Staff:

Mr. William Duffy
Ms. Nancy Kelly-Goodstein
Ms. Karen Halupke
Ms. Sarah Maestripieri, EMS Council Coordinator